Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
			(Column 1)		(Column 2)		7	TYPE		OR		
TOTAL CLAIMS			356					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEAE	BLE CLAIMS	34 min	us 20=	* / /			X\$ 9=	167	OR	X\$18=	
INDEPENDENT CLAIMS			[mir	nus 3 =	* 7			X40=	286	OR	X80=	
MU	LTIPLE DEPENI	DENT CLAIM PR	RESENT					+135=	(,)	OR	+270=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
_	Salari and a second	(Column 1)			mn 2)	(Column 3)	1 6	SMALL		OR	SWALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL A134	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	I CLAIM	<u> </u>		+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			ADDIT. FEE (23	ADDITUTEL						
ENT B	·	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	IMN 2) HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	SENTATION OF MULTIPLE DEPENDENT		IT CL AIN	=		X40=		OR	X80=		
	THINST PHESE	NTATION OF M	OLTIPLE DEF	ZENDEN	II CLAIV			+135=		OR	+270=	
							g	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	12
(Column 1) (Column 2) (Column 3)												
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT	۰	NUI PREV	HEST MBER YOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independ nt	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا ل	. 105			. 270	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270= TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												11
	The "Highest Nur	nber Previously P	aid For" (Total o	r Indeper	ident) is th	ne highest numb	per fou	and in the ap	propriate bo	x in co	olumn 1.	